

APPROVED FOR RELEASE 25/07/2000 CIA-RDP80-01060A000100010001-5
PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

Use continuation sheet(s) if necessary

D. O. YOU, NO.

BU, YOU, NO.

U. S. _____ (Department, bureau, or establishment)

Voucher prepared at _____ (Give place and date)

Payee's Account No. _____ Discount Terms _____

TO Edgerton, Germashausen & Grier, Inc.
(Payee)

(Address)

Contract No. **TE 2191**

Date _____

Reg. No.

Dote

Invoice Rec'd.

Shipped from

Weight

Govt. B/L No.

No. and Date of Order		Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE Cost Per		AMOUNT
			Invoice No.				
			87 (Orig. Inv. Att)				\$ 2,755.22
			88 (Orig. Inv. Att)				2,633.92
			89 (Orig. Inv. Att)				31,506.00
			90 (Orig. Inv. Att)				3,150.60
			91 (Orig. Inv. Att)				23,506.67
			92 (Orig. Inv. Att)				2,350.67
				TOTAL			\$65,903.08

(PAYEE MUST **NOT** USE THIS SPACE)

PAYMENT:

COMPLETE

PARTIAL

FINAL

PROGRESS

ADVANCE

DIFFERENCES

Amount verified; correct for
(Signature or initials)_____

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

T Approved for _____ = \$ _____

By _____

Title _____

Exchange rate _____ = \$1.00

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Check No. _____ on Treasurer of the United States

Check No. _____ on _____ (Name of Bank)

Cash, \$ _____, on _____, 19____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per .

Title

**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

D. O. YOU. NO. _____

Use continuation sheet(s) if necessary

BU. YOU. NO. 87

U. S. _____ Contracting Officer

(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

Payee's Account No. _____ Discount Terms _____

TO _____ Edgerton, Germeshausen & Grier, Inc.
(Payee)

(Address)

PAID BY

*Inc. #1
DPD-8433-LO
1 2.*

Contract No. TE 2191

Date 4/26/57

Req. No. _____

Date _____

Invoice Rec'd. _____

Shipped from _____

to _____

Weight _____

Govt. B/L No. _____

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
		Fixed Fee July 1960				\$2,755.22
TOTAL						<i>\$2,755.22</i>

(PAYEE MUST NOT USE THIS SPACE)

PAYMENT:

COMPLETE ☐
PARTIAL ☐
FINAL ☐
PROGRESS ☐
ADVANCE ☐

DIFFERENCES _____

Amount verified; correct for 2,755.22
(Signature or initials) _____

† Approved for _____ = \$ _____

By _____

Title _____

Exchange rate _____ = \$1.00

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

† _____
(Authorized Certifying Officer)

(Date) STAT

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by

Check No. 09. H 92 21 11 NOV 17 26 PM '60 on Treasurer of the United States

Check No. _____ an _____
(Name of Bank)

Cash, \$ _____, on _____, 19 _____ Payee _____

Per _____

Title _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Standard Form No. 1435
GSA 5030
1035-104**Purchase Voucher for Purchases and
Services Other Than Personal**
CONTINUATION SHEET

U. S. _____ Contracting Officer

Sheet No. 1 of Bureau Voucher No. 87

(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per		
		Costs- July 1960 ✓				\$27,552.	17
		Fixed Fee (10% of above) ✓				2,755.	22
		Fixed Fee Previously Billed ✓				-0-	
		Amount of this Voucher ✓				\$ 2,755.	22
		" I certify that the Fixed Fee claimed is correct and just; and that it is proportionate to the progress made on the Contract."					
		EDGERTON, GERMESHAUSEN & GRIER, INC.					
		<div style="border: 1px solid black; width: 300px; height: 80px; margin: 10px auto;"></div> <div style="text-align: right; margin-top: 10px;">_____ roller</div>					
		STAT					

Standard Form No. 1034
7 GAO 5030
1034-107PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

D. O. VOU. NO. _____

Use continuation sheet(s) if necessary

BU. VOU. NO. 88U. S. Contracting Officer

(Department, bureau, or establishment)

Voucher prepared at _____ 30 September 1960

(Give place and date)

Payee's Account No. _____ Discount Terms _____

TO Edgerton, Germeshausen & Grier, Inc.
(Payee)

(Address)

PAID BY

*Encl. #2 -
8433-60
102*Contract No. TE 2191Date 4/26/57

Req. No. _____

Date _____

Invoice Rec'd. _____

Shipped from _____

to _____

Weight _____

Govt. B/L No. _____

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
		Fixed Fee August 1960				\$2,633.92
TOTAL						<i>\$2633.92</i>

PAYMENT:

COMPLETE ☐
 PARTIAL ☐
 FINAL ☐
 PROGRESS ☐
 ADVANCE ☐

(PAYEE MUST NOT USE THIS SPACE)

DIFFERENCES _____

 Amount verified; correct for *\$2633.92*
 (Signature or initials) _____

† Approved for _____ = \$ _____

By _____

Title _____

Exchange rate _____ = \$1.00

 Pursuant to authority vested in me, I certify
 this voucher is correct and proper for payment.

† _____ (Date)

(Authorized Certifying Officer)

STAT _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ on Treasurer of the United States

Check No. _____ on _____ (Name of Bank)

Cash, \$ _____, on _____, 19 _____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per _____

Title _____

**Public Voucher for Purchases and
Services Other Than Personal**

CONTINUATION SHEET

U. S. Contracting Officer _____ Sheet No. 1 of Bureau Voucher No. 88
(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT
				Cost	Per	
		Costs-August 1960 Fixed Fee (10% of above) Fixed Fee Previously Billed Amount of this Voucher				\$26,339.24 2,633.92 -0- \$ 2,633.92
		"I certify that the Fixed Fee claimed is correct and just; and that it is proportionate to the progress made on the Contract." EDGERTON, GERMESHAUSEN & GRIER, INC. <div data-bbox="386 940 902 1066"></div> <div data-bbox="899 1003 976 1031">oller</div>				STAT

P. O. YOU, NO. _____

Use continuation sheet(s) if necessary

BU. YOU. NO. 89

(Department, bureau, or establishment)

(Give place and date)

Payee's Account No. _____ **Discount Terms** _____

TO Edgerton, Germeshausen & Grier, Inc.
(Payee)

(Address)

Contract No. TE-2191

Date 4/26/57

Req. No.

Dote

Invoice Rec'd.

Shipped from

to

Weight

Govt. B/L No.

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
		Month of September 1960				
		Materials & Services				\$ 8,880.50
		Direct Labor				11,115.34
		Travel Expense				663.33
		Burden				8,245.42
		G & A				2,601.41
						<u>\$31,506.00</u>
				TOTAL		\$31,506.00

(PAYEE MUST NOT USE THIS SPACE)

PAYMENT:

COMPLETE ☐

PARTIAL ☐

FINAL ☐

PROGRESS ☐

ADVANCE ☐

DIFFERENCES

Amount verified; correct for.

(Signature or initials)

† Approved for _____ = \$ _____

By _____

Title _____

Exchange rate _____ = \$1.00

Pursuant to authority vested in me, I certify that
this voucher is correct and proper for payment.

† _____
(Authorized Certifying Officer) (Date)

STAT

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by

Check No. _____ on Treasurer of the United States

Check No. _____ on _____ (Name of Bank)

Cash, \$ _____, on _____, 19____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per _____

Title_____

Standard Form no. 1003
7 GAO 5030
1035-105**Public Voucher for Purchases and
Services Other Than Personal**
CONTINUATION SHEET

U. S. Contracting Officer

(Department, bureau, or establishment)

Sheet No. 1 of Bureau Voucher No. 89

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT
				Cost	Per	
		Materials & Services \$ 8,880.50				
		Direct Labor 11,115.34				
		Travel Expense 663.33				
		*Burden 8,245.42 ✓				
		Total Direct Costs				\$28,904.59
		G & A				
		Total Direct Costs @ 9% ✓				2,601.41 ✓
						\$31,506.00 ✓
		*Burden: September Non Premium Direct Labor				
		80% of \$10,306.77-\$8,245.42 ✓				

**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

D. O. VOU. NO. _____

Use continuation sheet(s) if necessary

BU. VOU. NO. 90

U. S. Contracting Officer

(Department, bureau, or establishment)

Voucher prepared at _____ Date 10 November 1960

(Give place and date)

Payee's Account No. _____ Discount Terms _____

TO Edgerton, Germeshausen & Grier, Inc.

(Payee)

(Address)

PAID BY

*encl #4
DPD-8433-60
10/11/60*

Contract No. TE-2191

Date 4/26/57

Req. No. _____

Date _____

Invoice Rec'd. _____

Shipped from _____

to _____

Weight _____

Govt. B/L No. _____

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
		Fixed Fee September 1960				\$3,150.60
				TOTAL		<u>\$3,150.60</u>

PAYMENT:

COMPLETE ☐
PARTIAL ☐
FINAL ☐
PROGRESS ☐
ADVANCE ☐

(PAYEE MUST NOT USE THIS SPACE)

DIFFERENCES _____

Amount verified; correct for _____
(Signature or initials) _____

† Approved for _____ = \$ _____

By _____

Title _____

Exchange rate _____ = \$1.00

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

† _____ (Authorized Certifying Officer) (Date) _____

STAT _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by

Check No. _____ on Treasurer of the United States

Check No. _____ on _____ (Name of Bank)

Cash, \$ _____, on _____, 19 _____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per _____

Title _____

Standard Form no. 1033

SAQ 5030
1035-105**Public Voucher for Purchases and
Services Other Than Personal**

CONTINUATION SHEET

U. S. Contracting Officer

(Department, bureau, or establishment)

Sheet No. 1 of Bureau Voucher No. 90

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT
				Cost	Per	
		Costs-September 1960				\$31,506.00
		Fixed Fee (10% of above)				3,150.60
		Fixed Fee Previously Billed				-0-
		Amount of this Voucher				\$ 3,150.60
		<p>"I certify that the Fixed Fee claimed is correct and just; and that it is proportionate to the progress made on the Contract."</p> <div style="border: 1px solid black; width: 300px; height: 60px; margin: 10px auto;"></div> <p style="text-align: right;">INC.</p> <p style="text-align: right;">ller</p> <p style="text-align: right;">STAT</p>				

Standard Form No. 1034

7-540-5030

1034-107

**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

D. O. VOU. NO. _____

Use continuation sheet(s) if necessary

BU. VOU. NO. 91U. S. Contracting Officer

(Department, bureau, or establishment)

Voucher prepared at _____ 10 November 1960

(Give place and date)

Payee's Account No. _____ Discount Terms _____

TO Edgerton, Germeshausen & Grier, Inc.

(Payee)

(Address)

PAID BY

*Encl. #5
200-8933-62
102*Contract No. TE-2191Date 4/26/57

Req. No. _____

Date _____

Invoice Rec'd. _____

Shipped from _____

to _____

Weight _____

Govt. B/L No. _____

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
		Month of October 1960				
		Direct Labor				\$10,974.40
		Materials & Services				1,744.03
		Travel Expense				776.27
		Burden				8,071.05
		G & A				1,940.92
						<u>\$23,506.67</u>
					TOTAL	\$23,506.67

PAYMENT:

(PAYEE MUST NOT USE THIS SPACE)

COMPLETE ☐PARTIAL ☐FINAL ☐PROGRESS ☐ADVANCE ☐

DIFFERENCES _____

Amount verified; correct for \$23,506.67

(Signature or initials) _____

† Approved for _____ = \$ _____

By _____

Title _____

Exchange rate _____ = \$1.00

Pursuant to authority vested in me, I certify that
this voucher is correct and proper for payment.† _____ STAT_{ite}

(Authorized Certifying Officer)

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by

Check No. _____ on Treasurer of the United States

Check No. _____ on _____

(Name of Bank)

Cash, \$ _____, on _____, 19 _____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per _____

Title _____

**Public Voucher for Purchases and
Services Other Than Personal**
CONTINUATION SHEET

U. S. Contracting Officer

(Department, bureau, or establishment)

Sheet No. 1 of Bureau Voucher No. 91

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT
				Cost	Per	
		Direct Labor \$10,974.40				
		Materials & Services 1,744.03				
		Travel Expense 776.27				
		*Burden 8,071.05 ✓				
		Total Direct Costs				\$21,565.75 ✓
		G & A				
		Total Direct Costs @ 9% ✓				1,940.92 ✓
						\$23,506.67 ✓
		*Burden:				
October	Non Premium	Direct Labor \$10,088.81 @80%-\$8,071.05				

**PURCHASING VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

D. O. VOU. NO. _____

Use continuation sheet(s) if necessary

BU. VOU. NO. 92

U. S. Contracting Officer

(Department, bureau, or establishment)

Voucher prepared at _____ 10 November 1960

(Give place and date)

Payee's Account No. _____ Discount Terms _____

TO Edgerton, Germeshausen & Crier, Inc.
(Payee)

(Address)

PAID BY <i>Encl. #2</i> <i>DP2 8433-40</i>
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Contract No. TE-2191

Date 4/26/57

Req. No. _____

Date _____

Invoice Rec'd. _____

Shipped from _____

to _____

Weight _____

Gavt. B/L No. _____

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
		Fixed Fee October 1960				\$2,350.67
				TOTAL		<i>\$2,350.67</i>

PAYMENT:

COMPLETE ☐
PARTIAL ☐
FINAL ☐
PROGRESS ☐
ADVANCE ☐

(PAYEE MUST NOT USE THIS SPACE)

DIFFERENCES _____
Amount verified; correct for *\$2,350.67*
(Signature or initials) _____

† Approved for _____ = \$ _____

By _____

Title _____

Exchange rate _____ = \$1.00

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

† _____ STAT
(Authorized Certifying Officer)

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ on Treasurer of the United States
Check No. _____ on _____
(Name of Bank)
Cash, \$ _____, on _____, 19 _____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per _____
Title _____

Standard Form No. 1033
GSAO 5030
1033-105

Public Voucher for Purchases and Services Other Than Personal

CONTINUATION SHEET

U. S. Contracting Officer

(Department, bureau, or establishment)

Sheet No. 1 of Bureau Voucher No. 92

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT
				Cost	Per	
		Costs-October 1960 Fixed Fee (10% of above) Fixed Fee Previously Billed Amount this Voucher				\$23,506.67 2,350.67 -0- 2,350.67
		"I certify that the Fixed Fee claimed is correct and just; and that it is proportionate to the progress made on the Contract."				
		EDGERTON, GERMESHAUSEN & CRYST, INC.				
		<div style="border: 1px solid black; width: 300px; height: 40px; margin: 5px 0;"></div>				
		oller				STAT